

## **TEXAS DEPARTMENT OF LICENSING & REGULATION**

P.O. Box 12157 • Austin, Texas 78711-2157 www.tdlr.texas.gov

DECAL REPLACEMENT FORM			
NOTE: ALL INFORMATION MUST BE TYPED OR PRINTED IN INK.			
ELBI#:		Building Name:	
Building Physical Address:			
Danianing 1 Try close 7 ta an eco.			
Number, Street Name, Suite Number/Apartment Number City Zip Code			
	Old TXE Decal #	New TXE Decal #	
#	Being Replaced	Replacing Old	Comments (If Necessary)
1			
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15	2001110 7110 50014 1 050	TIE) ( TI IE AD 0) (E 10 TD IE AND	
BY SIGNING THIS FORM, I CERTIFY THE ABOVE IS TRUE AND CORRECT.			
Inspector Name (Printed)			TDLR INSP LIC #
Inspector Signature			Date:
THIS FORM MUST BE FILED DIRECTLY WITH THE REGULATORY PROGRAM MANAGEMENT DIVISION – ELEVATOR/ESCALATOR SAFETY			